PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

A 1W12176US

										<u> </u>		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS				56			Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA		В	SASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			56 mir	nus 20=	*36			X\$ 9=		OR	X\$18=	Syl
INDEPENDENT CLAIMS			5 mi	nus 3 =	* 2		t	X43=		OR	X86=	172
MULTIPLE DEPENDENT CLAIM P			RESENT					+145=	-	OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	L	TOTAL		OR	TOTAL	1590
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL I		OR	OTHER SMALL I	THAN
		(Column 1) (Colum						SWALL	-141111	•	SWALL	_111111
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	f	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							+145=		OR	+290=	
							L	TOTAL		OB	TOTAL	
							AD	DIT. FEE		OR,	ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMA!NING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY ,	PRESENT EXTRA		RATE	ADDI- T!ONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL			TOTAL	
		AD	DIT. FEE L		, ,	ADDIT. FEE						
		(Column 1)		(Colum		(Column 3)				_		
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							<u></u>	145=		OR	+290=	
**	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20, enter "20."	ADI	TOTAL DIT. FEE		OR ,	TOTAL ADDIT: FEE	
		ber Previously Paid					found	in the app	ropriate box	in colu	ımn 1.	